Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 1 of 61

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case	;) :
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Shavell First name T Middle name	First name Middle name	
	Bring your picture identification to your meeting with the trustee.	Walton Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you hav	re		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5183		

Entered 08/25/16 12:23:04 Desc Main Page 2 of 61 Case 16-27299 Doc 1 Filed 08/25/16 Document Case number (if known)

Debtor 1 Shavell T Walton

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	454 West 14th Place	If Debtor 2 lives at a different address:
		Chicago Heights, IL 60411 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 16-27299 Doc 1 Filed 08/25/16

Entered 08/25/16 12:23:04 Desc Main Page 3 of 61 Document Case number (if known) Debtor 1 Shavell T Walton

Par	t 2: Tell the Court About	Your E	Bankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are			rief description of each, see go to the top of page 1 and			.C. § 342(b) for Individu	uals Filing for Bankruptcy
	choosing to file under	Chapter 7						
			Chapter 11					
			Chapter 12					
			Chapter 13					
8. How you will pay the fee I will pay the entire fee when I file mabout how you may pay. Typically, if yorder. If your attorney is submitting you a pre-printed address.				u may pay. Typically, if you a attorney is submitting your p	are paying	the fee yourself,	you may pay with cash	n, cashier's check, or money
			I need to pay	the fee in installments. If		e this option, sign	and attach the Applica	ation for Individuals to Pay
		_	ŭ	e in Installments (Official For	,	Alain andian and the	f and filling for Ohan	stan 7. Division a finders many
				t my fee be waived (You ma uired to, waive your fee, and				of the official poverty line that
				r family size and you are un n to Have the Chapter 7 Filii				
			ше Аррисано	ir to riave the Chapter 7 Tilli	ig i ee wa	iivea (Omciai i on	in 103b) and me it with	your pennorn.
9.	Have you filed for bankruptcy within the last 8 years?	□ N						
	acto youro.		.	Northern District of				
			District	Illinois	When	6/25/13	Case number	13-25937
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy	■ N	0					
	cases pending or being filed by a spouse who is	□ Y	es.					
	not filling this case with you, or by a business partner, or by an affiliate?							
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
			Debtor				Relationship to y	
			District		When		Case number, if	known
11	Do you rent your	Пи	o Go to li	ne 12				
• • •	residence?			ur landlord obtained an evict	ion iudami	ent against vou a	nd do you want to stay	in your residence?
		Y	es		ori jaagiili	on agamot you a	na ao you want to stay	, 5 a. 1001401100 :
			_	No. Go to line 12.				
				Yes. Fill out <i>Initial Statemer</i> bankruptcy petition.	nt About ar	n Eviction Judgme	ent Against You (Form	101A) and file it with this

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 4 of 61

Debtor 1 Shavell T Walton Page 4 Of 61 Case number (if known)

Par	Report About Any Bu	sinesses `	You Own	as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Yes. Name and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	e & ZIP Code	
	it to this petition.		Check	k the appropriate bo	x to describe your business:	
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	in 11 U.S.C. 1116(1)(B).				
	For a definition of small	No.	I am n	ot filing under Chap	iter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.		
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Pari	t 4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat					
	of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?		
					Number, Street, City, State & Zip Code	

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 5 of 61

Debtor 1 Shavell T Walton

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Shavell T Walton		Document	Paye 0 01 01	Case number (if knot	wn)	
Par	t 6: Answer These Quest	ions for Re	porting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consum individual primarily for a personal, to	ner debts? Consumer family, or household pu	debts are defined in irpose."	11 U.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
			Are your debts primarily busines money for a business or investmen				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe that	at are not consumer de	bts or business debt	s	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.			
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do you are paid that funds will be available			excluded and administrative expenses	
	administrative expenses are paid that funds will		■ No				
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes				
18.	How many Creditors do	□ 1-49		1 ,000-5,000	[□ 25,001-50,000	
	you estimate that you owe?	50-99		☐ 5001-10,000		50,001-100,000	
		☐ 100-19 ☐ 200-99		☐ 10,001-25,000	ı	☑ More than100,000	
19.	How much do you	\$ 0 - \$5	0.000	□ \$1,000,001 - \$10 n	nillion [☐ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?	□ \$50,00	1 - \$100,000	□ \$10,000,001 - \$50		☐ \$1,000,000,001 - \$10 billion	
			01 - \$500,000 01 - \$1 million	\$50,000,001 - \$100 \$100,000,001 - \$50		☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion	
20.	How much do you	\$0 - \$5	0,000	□ \$1,000,001 - \$10 n	nillion [☐ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?	□ \$50,00	01 - \$100,000	□ \$10,000,001 - \$50		\$1,000,000,001 - \$10 billion	
			01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$100 □ \$100,000,001 - \$50		☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion	
		Φ ψ500,0	O Γ - Ψ Γ ΠΙΙΙΙΙΟΠ				
Par	7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
			nosen to file under Chapter 7, I am tes Code. I understand the relief a				
			ney represents me and I did not pay , I have obtained and read the notic			torney to help me fill out this	
		I request r	elief in accordance with the chapte	r of title 11, United Stat	es Code, specified in	n this petition.	
		bankruptcy and 3571.	nd making a false statement, conce y case can result in fines up to \$25 ell T Walton			erty by fraud in connection with a or both. 18 U.S.C. §§ 152, 1341, 1519,	
		Shavell		Signa	ature of Debtor 2		
		Executed		Exec	uted on		
			MM / DD / YYYY		MM / DD /	YYYY	

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 7 of 61

Debtor 1 Shavell T Walton Page 7 of 61 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Angie S	S. Lee	Date	August 25, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Angie S. L	ee		
Printed name			
Attorney A	Angie Lee, PC		
Firm name			
900 Ridge	Road		
2nd Floor,	Suite K		
Homewoo	d, IL 60430		
Number, Street,	City, State & ZIP Code		
Contact phone	708-845-7958	Email address	angielesq@yahoo.com
6282075			
Bar number & St	tate		

	Docum	ent Page 8 of 61	
mation to identify your	case:		
Shavell T Walton			
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
	Shavell T Walton First Name First Name	Shavell T Walton First Name Middle Name First Name Middle Name	Shavell T Walton First Name Middle Name Last Name First Name Middle Name Last Name

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 1,322.00 1c. Copy line 63, Total of all property on Schedule A/B..... 1,322.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 0.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 5,300.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 43,338.46 Your total liabilities 48.638.46 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 2,535.00 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 2,535.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have?

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Case 16-27299 Document

Page 9 of 61
Case number (if known) Debtor 1 Shavell T Walton

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,583.34 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	5,300.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	6,030.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	11,330.00

		Documen	t Page 10 of 61	
Fill in this informa	ation to identify your	case and this filing:		
Debtor 1	Shavell T Walton	1		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS	
Case number				☐ Check if this is an
				amended filing
Official For	m 106A/R			
	A/B: Prop	ertv		12/15
			e. If an asset fits in more than one cate	gory, list the asset in the category where you
	space is needed, attach		people are filing together, both are equal On the top of any additional pages, write	lly responsible for supplying correct e your name and case number (if known).
Part 1: Describe Ea	ach Residence, Building	g, Land, or Other Real Estate Yo	ou Own or Have an Interest In	
. Do you own or ha	ve any legal or equitabl	e interest in any residence, bui	ilding, land, or similar property?	
No. Go to Part 2	2.			
☐ Yes. Where is t	he property?			
Part 2: Describe Yo	our Vehicles			
someone else drive	s. If you lease a vehic	ele, also report it on Schedule	cles, whether they are registered or G: Executory Contracts and Unexpire	not? Include any vehicles you own that ed Leases.
3. Cars, vans, truc	cks, tractors, sport u	tility vehicles, motorcycles		
■ No				
☐ Yes				
			vehicles, other vehicles, and acces els, snowmobiles, motorcycle accessor	
■ No				
☐ Yes				
			ies from Part 2, including any entrie	
	our Personal and Hous	sehold Items table interest in any of the f	ollowing items?	Current value of the
Do you own or na	ive any legal of equil	able interest in any or the r	onowing items:	portion you own? Do not deduct secured claims or exemptions.
Examples: Majo ☐ No —		e, linens, china, kitchenware		
Yes. Describ	oe			

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

■ No

☐ Yes. Describe.....

Filed 08/25/16 Case 16-27299 Doc 1 Entered 08/25/16 12:23:04 Desc Main Page 11 of 61
Case number (if known) Document Debtor 1 **Shavell T Walton** 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... Clothing \$800.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,300,00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

Institution name: Yes.....

> \$22.00 17.1. Savings Illiana Financial

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Page 12 of 61
Case number (if known) Document Debtor 1 **Shavell T Walton** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

■ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

De	btor 1	Shavell T Walton	Document	Page 13 of 61 Case number (if known)	
	■ No		spousal support, child supp	ort, maintenance, divorce settlement, property	settlement
	Example ■ No	benefits; unpaid loans you made		efits, sick pay, vacation pay, workers' comper	nsation, Social Security
31.	Interest	Give specific information is in insurance policies les: Health, disability, or life insurance	e; health savings account (HSA); credit, homeowner's, or renter's insurar	nce
	Yes. N	Name the insurance company of eac Company nam		Beneficiary:	Surrender or refund value:
		Llife insuran	nce through Employer		\$0.00
33.	If you a someon ■ No □ Yes. Claims	erest in property that is due you from the beneficiary of a living trust, expended as died. Give specific information against third parties, whether or notes: Accidents, employment disputes	spect proceeds from a life in	isurance policy, or are currently entitled to receive the second of the	eive property because
		Describe each claim			
	No	ontingent and unliquidated claims Describe each claim	s of every nature, includin	g counterclaims of the debtor and rights to	set off claims
	No	ancial assets you did not already l	list		
36.		ne dollar value of all of your entrier rt 4. Write that number here	s from Part 4, including a	ny entries for pages you have attached	\$22.00
Par	t 5: Des	cribe Any Business-Related Property \	You Own or Have an Interest	In. List any real estate in Part 1.	
I	No. Go	wn or have any legal or equitable interest to Part 6. o to line 38.	est in any business-related p	roperty?	
Par		cribe Any Farm- and Commercial Fishi ou own or have an interest in farmland, list		n or Have an Interest In.	
46.	No. 0	own or have any legal or equitable Go to Part 7. Go to line 47.	e interest in any farm- or	commercial fishing-related property?	
Par	t 7:	Describe All Property You Own or Ha	ve an Interest in That You Di	d Not List Above	

Entered 08/25/16 12:23:04 Filed 08/25/16 Desc Main Case 16-27299 Doc 1 Document

Page 14 of 61
Case number (if known) Debtor 1 **Shavell T Walton**

53. I	Do you have other property of any kind you did not already Examples: Season tickets, country club membership	list?		
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Writ	te that n	umber here	\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5		\$0.00	
57.	Part 3: Total personal and household items, line 15		\$1,300.00	
58.	Part 4: Total financial assets, line 36		\$22.00	
59.	Part 5: Total business-related property, line 45		\$0.00	
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00	
61.	Part 7: Total other property not listed, line 54	+	\$0.00	

\$1,322.00

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

62. Total personal property. Add lines 56 through 61...

\$1,322.00

\$1,322.00

			Document		2age 15 of 61	_	
i	I in this informa	ation to identify your	case:				
De	ebtor 1	Shavell T Walton					
_	10	First Name	Middle Name	L	ast Name		
	ebtor 2 ouse if, filing)	First Name	Middle Name	L	ast Name		
Un	nited States Banl	kruptcy Court for the:	NORTHERN DISTRICT OF	ILLIN	OIS		
Са	ase number						
(if k	known)						Check if this is an amended filing
) [.]	fficial For	m 106C					
3	chedule	C: The Pro	pperty You Cla	im	as Exempt		4/16
ne ee as	property you list eded, fill out and se number (if kno	ted on <i>Schedule A/B: F</i> attach to this page as r own).	Property (Official Form 106A/B) many copies of Part 2: Addition	as yo nal Pa	ther, both are equally responsible for bur source, list the property that you age as necessary. On the top of any	claim as ex additional p	tempt. If more space is bages, write your name and
pe ny un	ecific dollar am applicable stands ads—may be un amption to a pa	ount as exempt. Alter tutory limit. Some exe limited in dollar amou	natively, you may claim the f emptions—such as those for int. However, if you claim an	ull fa heal exen	ount of the exemption you claim. ir market value of the property be th aids, rights to receive certain to nption of 100% of fair market valu determined to exceed that amoun	eing exempt benefits, an le under a l	ted up to the amount of d tax-exempt retirement aw that limits the
Pa	rt 1: Identify	the Property You Cla	im as Exempt				
1.	Which set of e	exemptions are you cl	aiming? Check one only, ever	n if yo	our spouse is filing with you.		
	You are clai	ming state and federal	nonbankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	_		ns. 11 U.S.C. § 522(b)(2)		3 == (=/(=/		
2.				mpt.	fill in the information below.		
		erty you list on Schedule A/B that you claim as exempt, fill in the information below. On of the property and line on Current value of the Amount of the exemption you claim portion you own			Specific la	ws that allow exemption	
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Bed, couch,		\$500.00		\$500.00	735 ILC	S 5/12-1001(b)
	Line nom con	, adio 7 v 2.			100% of fair market value, up to any applicable statutory limit		
	Clothing	edule A/B: 11.1	\$800.00		\$800.00	735 ILC:	S 5/12-1001(a)
	Ellio Holli Goric	Jagio 7 V D. TTT			100% of fair market value, up to any applicable statutory limit		
3.	(Subject to adj ■ No	ustment on 4/01/19 and you acquire the propert	, ,	ses fi	iled on or after the date of adjustme	,	

Fill in this information to identify your case:					
Debtor 1	Shavell T Walton				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

		Documer	nt Page 17 o	of 61	-	
Fill in this	information to identify your ca	ase:				
Debtor 1	Shavell T Walton					
20010	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing	ing) First Name	Middle Name	Last Name			
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS			
Case num	her					
(if known)					☐ Check	if this is an
					amend	ed filing
Ott: -: -1	Γ 400Γ/Γ					
	Form 106E/F					4045
	ule E/F: Creditors Wi					12/15
	lete and accurate as possible. Use bry contracts or unexpired leases t					
Schedule G:	: Executory Contracts and Unexpir	ed Leases (Official Form 10	6G). Do not include any	creditors with partially	secured claims that a	re listed in
	: Creditors Who Have Claims Secu					
	the Continuation Page to this page ase number (if known).	. If you nave no information	to report in a Part, do i	not file that Part. On the t	op of any additional	pages, write your
Part 1:	List All of Your PRIORITY Uns	ecured Claims				
1. Do any	r creditors have priority unsecured	claims against you?				
☐ No.	Go to Part 2.					
Yes).					
2. List all	of your priority unsecured claims.	If a creditor has more than or	ne priority unsecured clai	m, list the creditor separate	ely for each claim. For	each claim listed,
	what type of claim it is. If a claim has					
	 e, list the claims in alphabetical order If more than one creditor holds a part 			an two priority unsecured cl	aims, fill out the Contir	nuation Page of
	explanation of each type of claim, se			+ \		
(i oi aii	explanation of each type of claim, se		III the mandalidation bookle	Total claim	Priority	Nonpriority
24 ID	10	l and delimite of		¢ E 200 00	amount	amount
2.1 IR	iority Creditor's Name	Last 4 digits of a	account number	\$5,300.00	Unknown	Unknown
	O Box 7346	When was the d	ebt incurred?			
	hiladelphia, PA 19122				_	
	umber Street City State Zlp Code	_	ou file, the claim is: Che	eck all that apply		
_	incurred the debt? Check one.	☐ Contingent				
■ De	ebtor 1 only	☐ Unliquidated				
☐ De	ebtor 2 only	☐ Disputed				
☐ De	ebtor 1 and Debtor 2 only	7.	Y unsecured claim:			
☐ At	least one of the debtors and another	☐ Domestic sup	port obligations			
□сн	neck if this claim is for a communi	ty debt Taxes and ce	rtain other debts you owe	e the government		
Is the	claim subject to offset?	☐ Claims for dea	ath or personal injury whi	le you were intoxicated		
■ No	0	Other. Specify	1			
☐ Ye	es		Taxes			
Part 2:	List All of Your NONPRIORITY	Unsecured Claims				
^	Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules.					
□ No.	You have nothing to report in this pa	rt. Submit this form to the coul	t with your other schedul	les.		
Yes	i.					
4. List all	of your nonpriority unsecured claim	ms in the alphabetical orde	r of the creditor who ho	olds each claim. If a credit	or has more than one	nonpriority
	red claim, list the creditor separately ne creditor holds a particular claim, lis					

Total claim

Part 2.

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 18 of 61

Debtor 1 Shavell T Walton Case number (if know) 4.1 \$906.00 **Aargon Agency** Last 4 digits of account number 1692 Nonpriority Creditor's Name 8668 Spring Mountain Rd When was the debt incurred? Las Vegas, NV 89117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 10 Com Ed Commonwealth Edison ☐ Yes 4.2 **Accounts Recovery Bureau** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 6768 When was the debt incurred? Wyomissing, PA 19610 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Collection Other. Specify 4.3 **Advocate Medical Group** Last 4 digits of account number \$382.00 Nonpriority Creditor's Name 701 Lee St When was the debt incurred? Suite 300 Des Plaines, IL 60016 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill ☐ Yes

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 19 of 61

Debtor 1 Shavell T Walton Case number (if know) 4.4 \$0.00 Afni Last 4 digits of account number 9858 Nonpriority Creditor's Name 1310 Martin Luther King Dr When was the debt incurred? **Opened 03/13** Bloomington, IL 61701 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Sprint ☐ Yes 4.5 American InfoSource \$705.00 Last 4 digits of account number Nonpriority Creditor's Name Mail Station N387 When was the debt incurred? 2230 E Imperial Hwy El Segundo, CA 90245-3504 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection for DirecTv ☐ Yes 4.6 American InfoSource Last 4 digits of account number \$526.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 248848 Oklahoma City, OK 73124-8848 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Collection for TMobile

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 20 of 61

Debtor 1 Shavell T Walton Case number (if know) 4.7 \$798.00 **Arnoldharris** Last 4 digits of account number Nonpriority Creditor's Name 111 West Jackson When was the debt incurred? Suite 600 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Tickets** Other. Specify 4.8 **Baxter Credit Union** Last 4 digits of account number \$494.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 8133 Vernon Hills, IL 60061 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Loan 4.9 **Baxter Ecu/BCU** \$494.00 Last 4 digits of account number 0701 Nonpriority Creditor's Name 340 N Milwaukee Ave. Opened 12/09 Last Active When was the debt incurred? 8/01/10 Attn: Bankruptcy Vernon Hills, IL 60061 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Deposit Related ☐ Yes

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 21 of 61 Debtor 1 Shavell T Walton Case number (if know) 4.1 **Bay Area Credit Service** \$0.00 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 467600 When was the debt incurred? Atlanta, GA 31146 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes 4.1 City of Chicago - Dept of Finance \$1,487.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Talan & Ktsanes When was the debt incurred? 223 W Jackson Suite 512 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Judgment

City of Markham Last 4 digits of account number Nonpriority Creditor's Name 16313 S Kedzie Parkway When was the debt incurred? Attn Bankruptcy Markham, IL 60428 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Ticket ☐ Yes

4.1

2

\$247.00

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Page 22 of 61 Case number (if know) Document Debtor 1 Shavell T Walton 4.1 \$300.00 Dependon Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 4833 When was the debt incurred? Oak Brook, IL 60522 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection ☐ Yes 4.1 **EMP of Chicago** \$825.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 182554 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify Medical bill ☐ Yes

Enhanced Recovery Corp	Last 4 digits of account number		
Nonpriority Creditor's Name 8014 Bayberry Road Jacksonville, FL 32256 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneth an that apply		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify Collection		

4.1 5

\$0.00

Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Case 16-27299

Page 23 of 61 Case number (if know) Document Debtor 1 Shavell T Walton

4.1 6	Escallate LLC	Last 4 digits of account number	\$717.00	
<u> </u>	Nonpriority Creditor's Name 5200 Stoneham Rd North Canton, OH 44720	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Collection		
4.1 7	Fair Collections and Outsourcing	Last 4 digits of account number		\$1,253.00
	Nonpriority Creditor's Name 12304 Baltimore Ave Suite E	When was the debt incurred?		
	Beltsville, MD 20705 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	No	Debts to pension or profit-sharing		
	☐ Yes	Other Specify Collection		
4.1 8	Fst Premier	Last 4 digits of account number	4515	\$696.00
	Nonpriority Creditor's Name 601 S Minneapolis Ave	When was the debt incurred?	Opened 05/16 Last Active 7/26/16	
	Sioux Falls, SD 57104 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	<u> </u>	По и		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other Specify Credit Card		
		- Other. Opeony		

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 24 of 61 Case number (if know) Debtor 1 Shavell T Walton 4.1 **Fst Premier** 2623 \$352.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 02/15 Last Active 601 S Minneapolis Ave When was the debt incurred? 6/02/16 Sioux Falls, SD 57104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.2 **Global Telecom** \$205.00 Last 4 digits of account number Nonpriority Creditor's Name 4000 Executive Park Dr South When was the debt incurred? Cincinnati, OH 45241 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Collection Other. Specify

Nonpriority Creditor's Name 111 W Jackson Blvd When was the debt incurred? Suite 400 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Med1 02 Franciscan St James Health ☐ Yes

Last 4 digits of account number

5509

4.2

Harris & Harris

\$0.00

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 25 of 61 Case number (if know)

HCM First Notice of Loss Nonpriority Creditor's Name

Last 4 digits of account number

2	HCM First Notice of Loss	Last 4 digits of account number	\$9,831.00				
,	Nonpriority Creditor's Name 14501 Hertz Quail Springs Parkway Oklahoma City, OK 73134	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only						
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts				
	Yes	Other. Specify Accident					
4.2	Hertg Accpt	Last 4 digits of account number	5101	\$6,187.00			
	Nonpriority Creditor's Name						
	121 S Main St Elkhart, IN 46516	When was the debt incurred?	Opened 9/25/10 Last Active 11/30/12				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing					
	Yes	Toyota Corolla					
4.2	Hghts Aut Cu	Last 4 digits of account number	0010	\$3,635.00			
	Nonpriority Creditor's Name	-					
	21540 Cottage Grov Chicago Height, IL 60411	When was the debt incurred?	Opened 8/10/12 Last Active 11/26/13				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another						
	☐ Check if this claim is for a community						
	debt						
	Is the claim subject to offset?	aim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes ☐ Other. Specify ☐ Unsecured						

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 26 of 61 Case number (if know) Debtor 1 Shavell T Walton 4.2 \$392.00 **Hghts Aut Cu** 0011 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 12/13/12 Last Active 21540 Cottage Grov When was the debt incurred? 11/26/13 Chicago Height, IL 60411 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other, Specify 4.2 **ICS/Illinois Collection Service** 9575 \$133.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 1010 When was the debt incurred? **Opened 02/15** Tinley Park, IL 60477 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Collection Attorney Midtown Dental Clinic** 4.2 **Ingalls Memorial Hospital** \$156.10 Last 4 digits of account number Nonpriority Creditor's Name PO Box 75608 When was the debt incurred?

Chicago, IL 60675 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical bill ☐ Yes

Page 27 of 61 Case number (if know) Document Debtor 1 Shavell T Walton 4.2 **MCSI** \$0.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 7300 College Dr When was the debt incurred? Palos Heights, IL 60463 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes 4.2 **Municipal Collections of America** \$55.36 Last 4 digits of account number 9 Nonpriority Creditor's Name When was the debt incurred? 3348 Ridge Road Lansing, IL 60438 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection for Calumet Dermatology Assoc ☐ Yes 4.3 **Municipal Collections of America** \$650.00 0 Last 4 digits of account number Nonpriority Creditor's Name 3348 Ridge Road When was the debt incurred? Lansing, IL 60438 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No

☐ Yes

☐ Student loans

report as priority claims

■ Other. Specify **Heights**

 \square Obligations arising out of a separation agreement or divorce that you did not

Collection for Village of South Chicago

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Check if this claim is for a community

Is the claim subject to offset?

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 28 of 61 Debtor 1 Shavell T Walton Case number (if know) 4.3 Northwestern Hospital \$50.00 Last 4 digits of account number Nonpriority Creditor's Name 250 E. Superior Street, LC-2201 When was the debt incurred? Patient Billing - Bankruptcy Chicago, IL 60611 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical bill ☐ Yes 4.3 **Penn Credit Corp** \$0.00 Last 4 digits of account number 2 Nonpriority Creditor's Name **PO Box 988** When was the debt incurred? Harrisburg, PA 17108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collection ☐ Yes 4.3 QC Holdings Inc \$68.00 3 Last 4 digits of account number Nonpriority Creditor's Name c/o Marauder Corp When was the debt incurred? 74923 Highway 111 Indian Wells, CA 92210 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Collection

Document Page 29 of 61 Debtor 1 Shavell T Walton Case number (if know) 4.3 **Quantum3 Group** \$463.00 Last 4 digits of account number 4 Nonpriority Creditor's Name **PO Box 788** When was the debt incurred? Kirkland, WA 98083 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes 4.3 **RJM Acquisitions** \$0.00 Last 4 digits of account number 5 Nonpriority Creditor's Name PO Box 12023 When was the debt incurred? Hauppauge, NY 11788 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collection ☐ Yes 4.3 Sec of State \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 2701 Dirksen Parkway When was the debt incurred? Attn: Bankruptcy Springfield, IL 62723 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice only ☐ Yes

Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Case 16-27299

Page 30 of 61 Case number (if know) Document Debtor 1 Shavell T Walton

4.3 7	Sprint	Last 4 digits of account number	\$2,385.00
,	Nonpriority Creditor's Name Customer Service - Bankruptcy PO Box 7949	When was the debt incurred?	
	Overland Park, KS 66207 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Cell phone	
4.3	St James Hospital	Last 4 digits of account number	\$1,226.00
<u> </u>	Nonpriority Creditor's Name Patient Billing	When was the debt incurred?	
	1423 Chicago Road Chicago Heights, IL 60411 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bill	
4.3 9	The Ludwig Company	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name c/o Cary G Schiff 134 N LaSalle #1720	When was the debt incurred?	
	Chicago, IL 60602 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset? —	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Notice	

Page 31 of 61 Document Debtor 1 Shavell T Walton Case number (if know) 4.4 \$340.00 **Town of Griffith** Last 4 digits of account number 0 Nonpriority Creditor's Name 111 North Broad Street When was the debt incurred? Griffith, IN 46319 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Tickey 4.4 **Univerisity of Chicago Medicine** \$550.00 Last 4 digits of account number Nonpriority Creditor's Name 15965 Collections Center Drive When was the debt incurred? Chicago, IL 60693-0159 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify Medical bill ☐ Yes 4.4 **US Bank** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 5229 When was the debt incurred? Cincinnati, OH 45201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Checking account ☐ Yes

Page 32 of 61 Case number (if know) Document Debtor 1 Shavell T Walton Us Dept of Ed/Great Lakes 4.4 8581 \$6,030.00 3 Last 4 digits of account number **Educational Lo** Nonpriority Creditor's Name Opened 02/14 Last Active 2401 International 7/31/16 When was the debt incurred? Madison, WI 53704 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify Educational \$250.00 Vilage of Matteson Last 4 digits of account number Nonpriority Creditor's Name 20400 S Cicero When was the debt incurred? Attn Tickets Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Ticket ☐ Yes 4.4 Village of Lynwood \$200.00 Last 4 digits of account number Nonpriority Creditor's Name 21460 Lincoln Highway When was the debt incurred? Lynwood, IL 60411 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

■ No ☐ Yes \square Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Ticket

☐ Student loans

Other. Specify

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04

Desc Main Document Page 33 of 61 Debtor 1 Shavell T Walton Case number (if know) 4.4 Village of Richton Park \$250.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 4455 Sauk Trail When was the debt incurred? Attn Tickets Richton Park, IL 60471 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Ticket 4.4 Village of Sauk Village \$100.00 Last 4 digits of account number Nonpriority Creditor's Name 21701 Torrence Ave When was the debt incurred? Sauk Village, IL 60411 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Ticekt 4.4 Washington Mutual Bank \$0.00 8 Last 4 digits of account number Nonpriority Creditor's Name PO Box 99604 When was the debt incurred? Arlington, TX 76096 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only

☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Checking account ☐ Yes

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Page 34 of 61 Case number (if know) Document

Debtor 1 Shavell T Walton

4.4 9	West Bay Acquisitions	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name c/o Receivables Mngmt	When was the debt incurred?	
	6440 Flying Cloud Dr Eden Prairie, MN 55344 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	5,300.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	5,300.00
				1	Total Claim
	6f.	Student loans	6f.	\$	6,030.00
Total claims					
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	37,308.46
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	43.338.46

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		DOCUME	<u>ni Pade 35 di b</u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Shavell T Walton			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	

		Docume	ent Page 36 o	ot 61	
Fill in this	information to identify you	r case:			
Debtor 1	Chavell T Walter	n			
Deploi	Shavell T Walton First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fill	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Ormod Ote	neo Barmaptoy Court for the.				
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
		1 1 4			
Sched	dule H: Your Cod	debtors			12/15
	e and case number (if known you have any codebtors? ()	,		e as a codebtor.	
20	, , , , , , , , , , , , , , , , , , , ,	you are iming a joint oace,	ao not not ounter opouet		
■ No					
☐ Ye	S				
	thin the last 8 years, have yona, California, Idaho, Louisian				y states and territories include
	. Go to line 3.				
☐ Ye	s. Did your spouse, former spo	ouse, or legal equivalent live	with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor			Column 2: The cre	editor to whom you owe the debt
	Name, Number, Street, City, State and	ZIP Code		Check all schedule	
0.4				Поливи	
3.1	Name			Schedule D, line	
	Traino			☐ Schedule E/F, I	
				☐ Schedule G, line	e
-	Number Street			_	
	City	State	ZIP Code		
3.2				Schedule D, line	
	Name			☐ Schedule E/F, I	
				☐ Schedule G, line	e
	Number Street				
	City	State	ZIP Code		

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 37 of 61

F :II	in this information to identify, your							
	in this information to identify your captor 1 Shavell T Wa							
	obtor 2 ouse, if filing)				_			
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS					
(If kr	se number nown)							
	fficial Form 106l					MM / DD/ Y	YYY	
S	chedule I: Your Inc	ome						12/1
spo	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. (t 1: Describe Employment Fill in your employment	r spouse is not filing wi	th you, do not include	infori	nation abo	out your spo	ouse. If more spa	ace is needed,
1.	information.		Debtor 1			Debtor 2	or non-filing sp	oouse
	If you have more than one job, attach a separate page with information about additional employers.	Employment status			☐ Emplo	•		
			☐ Not employed			☐ Not e	mployed	
		Occupation	Machine Operator Asst					
	Include part-time, seasonal, or self-employed work.	Employer's name	Georgia Pacific			_		
	Occupation may include student or homemaker, if it applies.	Employer's address	4390 Liberty St Aurora, IL					
		How long employed the	here? July 7, 20	016				
Par	t 2: Give Details About Mor	thly Income						
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to rep	ort for	any line, w	rite \$0 in the	space. Include y	our non-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	employers t	for that perso	n on the lines be	low. If you need
					For I	Debtor 1	For Debtor 2 non-filing spo	
2.	List monthly gross wages, salar deductions). If not paid monthly, or			2.	\$	2,643.33	\$	N/A
3.	Estimate and list monthly overti	ime pay.		3.	+\$	650.00	+\$	N/A

3,293.33

N/A

Calculate gross Income. Add line 2 + line 3.

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 38 of 61

Deb	tor 1	Shavell T Walton	-	С	ase r	number (<i>if know</i>	n)				
					For	Debtor 1			Debtor filing s	2 or pouse	
	Cop	by line 4 here	4.	_	\$	3,293.3	3	\$		N/A	<u> </u>
5.	List	all payroll deductions:									
0.	5a.	Tax, Medicare, and Social Security deductions	5a	,	\$	225.0	^	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$ —	325.0 0.0		\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c		\$_	0.0		\$		N/A	
	5d.	Required repayments of retirement fund loans	5d	l.	\$ 	0.0		\$		N/A	_
	5e.	Insurance	5e) .	\$	433.3		\$		N/A	_
	5f.	Domestic support obligations	5f.		\$	0.0	0	\$		N/A	_
	5g.	Union dues	5g		\$	0.0		\$		N/A	_
	5h.	Other deductions. Specify:	_ 5h	1.+	\$	0.0	0 -	+ \$		N/A	<u>\</u>
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	,	\$	758.3	<u>3</u>	\$		N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,	\$	2,535.0	0_	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	١.	\$	0.0	0	\$		N/A	
	8b.	Interest and dividends	8b).	\$ 	0.0	_	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	: .	\$	0.0	0	\$		N/A	
	8d.	Unemployment compensation	8d	l.	\$	0.0		\$		N/A	
	8e.	Social Security	8e	.	\$	0.0	0	\$		N/A	<u>\</u>
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g		\$	0.0		\$		N/A N/A	
	8h.	Other monthly income. Specify:	8h	,	\$ —		0 -			N/A	_
	011.		_ '''	···		0.0		_		14/7	<u>`</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.0	0	\$		N/	Ά
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2	2,535.00 +	\$		N/A	= \$	2,535.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-		-,000.00	Ť-		14//		2,000.00
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe			•			chedule 11.	4	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certainlies							12.	\$	2,535.00
13.	Do	you expect an increase or decrease within the year after you file this form	?						!	Combi	ined Ily income
		No.									
		Voc Evolain:									

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 39 of 61

Fill	in this information to identify your case:		1		
Deb	otor 1 Shavell T Walton		Chec	k if this is:	
			_	An amended filing	
	ouse, if filing)				ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILL	INOIS	-	MM / DD / YYYY	
	se number nown)				
Of	fficial Form 106J				
	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to thi mber (if known). Answer every question.				
Par					
1.	Is this a joint case?				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expens</i>	es for Separate House	ehold of Debt	or 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the				□No
	dependents names.				☐ Yes
					□ No □ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include ■ No.				☐ Yes
J.	expenses of people other than				
	yourself and your dependents?				
Est exp	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a supplicable date.				
the	lude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I</i> . ficial Form 106I.)			Your exp	enses
,	,				
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	. Include first mortgage	e 4. \$		999.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues		4c. \$ 4d. \$		0.00
5.	Additional mortgage payments for your residence, such as h	home equity loans	4u. 5 5. \$		0.00

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 40 of 61

Debtor 1	Shavell T Walton	Case num	ber (if known)	
6. Utili	ijes:			
6a.	Electricity, heat, natural gas	6a.	\$	150.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	150.00
6d.	Other. Specify:	6d.	\$	0.00
	d and housekeeping supplies	7.	\$	319.00
	dcare and children's education costs	8.	\$	
_		9.	\$	0.00
	hing, laundry, and dry cleaning		·	50.00
	onal care products and services	10.	\$	50.00
	ical and dental expenses	11.	\$	20.00
	sportation. Include gas, maintenance, bus or train fare.	12.	\$	250.00
	ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
			·	
	ritable contributions and religious donations	14.	\$	0.00
i. Insu	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15a. 15b.	·	
			·	0.00
	Vehicle insurance	15c.	·	47.00
	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	40	•	
	ify: IRS	16.	\$	50.00
	allment or lease payments:	47	•	400.00
	Car payments for Vehicle 1	17a.	*	400.00
	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify: Student loans	17c.	\$	50.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as		•	0.00
	acted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	
	er payments you make to support others who do not live with you.		\$	0.00
Spe	·	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sche			
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	•	0.00
	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Othe	er: Specify:	21.	+\$	0.00
			, , , , , , , , , , , , , , , , , , ,	0.00
	ulate your monthly expenses			
	Add lines 4 through 21.		\$	2,535.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,535.00
			· —	
	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	· <u> </u>	2,535.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,535.00
				<u> </u>
23c.	Subtract your monthly expenses from your monthly income.			0.00
	The result is your monthly net income.	23c.	\$	0.00
	ou expect an increase or decrease in your expenses within the year after yo			
	xample, do you expect to finish paying for your car loan within the year or do you expect your	r mortgage į	payment to increase	or decrease because o
_	ication to the terms of your mortgage?			
	0.			
	es. Explain here:			

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 41 of 61

Fill in this infor	mation to identify your	case:			
Debtor 1	Shavell T Walton				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an	
				amended filing	
Official Forr	m 106Dec				
	-	n Individual	Debtor's Schedu	ulos	
Declara	Hon About a	III IIIuIViuuai	Deptor 5 Scried		2/15
If two married p	eople are filing togethe	r, both are equally respor	nsible for supplying correct infor	mation.	
obtaining mone		n connection with a bank		a false statement, concealing property, o p to \$250,000, or imprisonment for up to	
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out bankrupto	cy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition Preparer's Notice	
				Declaration, and Signature (Official Form 1	19)
•	alty of perjury, I declare re true and correct.	that I have read the sumi	mary and schedules filed with th	is declaration and	
X /s/ Sha	avell T Walton		X		

Signature of Debtor 2

Date

Shavell T Walton

Signature of Debtor 1

Date August 25, 2016

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 42 of 61

Fill	in this inform	nation to identify you	r case:						
De	btor 1	Shavell T Walton First Name	Middle Name	Last Name					
	btor 2 buse if, filing)	First Name	Middle Name	Last Name					
Un	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS					
	se number				_	Check if this is an amended filing			
	ficial For		Affairs for Individ	duals Filing for B	ankruntev	4/10			
Be a info nun	as complete a ormation. If m nber (if known	nd accurate as possi ore space is needed, ı). Answer every que	ble. If two married people a attach a separate sheet to stion.	are filing together, both are this form. On the top of an	equally responsible for sup y additional pages, write you	plying correct			
			rital Status and Where You	Lived Before					
1.	wnat is your	current marital statu	IS ?						
	□ Married■ Not married	ried							
2.	During the la	uring the last 3 years, have you lived anywhere other than where you live now?							
	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .				
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
3. stat					ity property state or territor ico, Texas, Washington and V				
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).					
Pa	rt 2 Explain	n the Sources of You	r Income						
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?			
	□ No								
	Yes. Fill	in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,600.00	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

Official Form 107

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document

Page 43 of 61 Case number (if known) Debtor 1 Shavell T Walton

				Debtor 1		Debtor 2		
For last calendar year:		Sources of income Check all that apply.	Check all that apply. (before deductions and exclusions)		ome pply.	Gross income (before deductions and exclusions)		
					missions,			
				☐ Operating a business		☐ Operating a	business	
	r the calend anuary 1 to			■ Wages, commissions, bonuses, tips	\$30,000.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
	List each	•	the gross inco	e and you have income that yome from each source separa		·		
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incorporation Describe below.		Gross income (before deductions and exclusions)
	om January e date you f		nt year until nkruptcy:	Unemployment	\$14,400.00			
Pa	rt 3: List	: Certain Pa	ayments You	Made Before You Filed for	Bankruptcy			
6.		Debtor 1's	s or Debtor 2 ebtor 1 nor D	's debts primarily consumer bebtor 2 has primarily consu personal, family, or househo	r debts? umer debts. Consumer debt	s are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		During the	90 days befo	re you filed for bankruptcy, di	d you pay any creditor a tota	ıl of \$6,425* or mor	e?	
		□ No.	Go to line 7	•				
		□ Yes	paid that cr	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the	nts for domestic support obliq			
		* Subject	to adjustment	t on 4/01/19 and every 3 years	s after that for cases filed on	or after the date of	f adjustment	•
	■ Yes.			r both have primarily consure you filed for bankruptcy, di		al of \$600 or more?		
		No.	Go to line 7					
		□ Yes	include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.				
	Creditor'	s Name an	d Address	Dates of payme	ent Total amount	Amount you	Was this p	payment for

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 44 of 61 Case number (# known)

	- Cilaron i Iranon			,	-	
7.	Within 1 year before you filed for bankrupton					
	Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	control, or owner of 20% o	r more of their voting	g securities; and ar	ny managing ag	gent, including one for
	■ No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cost		ments or transfer a	any property on a	ccount of a de	ebt that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	this payment itor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
 Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or cust modifications, and contract disputes. 						
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	hed, attached	, seized, or levied?
	□ No. Go to line 11.					
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
	Houte Apout	Explain what happened		2010		#E 000 00
	Hertg Accpt 121 S Main St	Toyota Corolla - acc	ident	2016		\$5,000.00
	Elkhart, IN 46516	☐ Property was reposse				
		☐ Property was foreclos☐ Property was garnish				
		■ Property was attache	d, seized or levied.			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		luding a bank or fii	nancial institution	, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount
12.	Within 1 year before you filed for bankrupton		erty in the possess			fit of creditors, a
	court-appointed receiver, a custodian, or a	inother official?				
	No					

☐ Yes

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main

Page 45 of 61
Case number (if known) Document Debtor 1 Shavell T Walton

Pai	t 5: List Certain Gifts and Contributions							
13.	 Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. 							
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No □ Yes. Fill in the details for each gift or contribution.							
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value			
Pai	t 6: List Certain Losses							
15.	or gambling?	cy or	since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster,			
		locari	ibo any incurance coverage for the loss	Data of your	Value of property			
	how the loss occurred	nclude	ibe any insurance coverage for the loss the amount that insurance has paid. List pending not claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost			
Pai	t 7: List Certain Payments or Transfers							
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.							
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	u	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	Attorney Angie Lee, PC 900 Ridge Road 2nd Floor, Suite K Homewood, IL 60430 angielesq@yahoo.com		\$1200 = \$832 attorney fees, \$335 filing fee, \$33 credit report	August 2016	\$832.00			
17.	Within 1 year before you filed for bankrupte promised to help you deal with your credit Do not include any payment or transfer that you	ors o		or transfer any prope	rty to anyone who			
	■ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Case 16-27299 Page 46 of 61
Case number (if known) Document

Debtor 1 **Shavell T Walton**

 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do no include gifts and transfers that you have already listed on this statement. No 									
	☐ Yes. Fill in the details.								
	Person Who Received Transfer Address	•	Description and value of property transferred		ibe any property or ents received or debts n exchange	Date transfer was made			
	Person's relationship to you								
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No								
	■ No □ Yes. Fill in the details.								
	Name of trust Description and value of the property transferred					Date Transfer was			
						made			
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and St	orage Unit	s				
20.	Within 1 year before you filed for bankruptcy	y, were any financial ac	counts or instru	uments he	ld in your name, or for y	our benefit, closed,			
	sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc No				t; shares in banks, cred	it unions, brokerage			
	Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 y cash, or other valuables?	rear before you filed for	r bankruptcy, ar	ny safe dep	oosit box or other depos	sitory for securities,			
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?			
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control	for Someone Fise							
	Do you hold or control any property that sor for someone.		ude any propert	ty you borr	rowed from, are storing	for, or hold in trust			
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value			
Par	t 10: Give Details About Environmental Info	,							
or ·	the purpose of Part 10, the following definition	ons anniv							

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Page 47 of 61
Case number (if known) Document

Debtor 1 **Shavell T Walton**

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	haz	ardous material, pollutant, contaminant,	or similar term.		,,	,		
Rep	ort a	all notices, releases, and proceedings that	at you know about, regardless of wher	n the	ey occurred.			
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
		No						
		Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice		
25.	Hav	re you notified any governmental unit of	any release of hazardous material?					
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	■ No □ Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case		
Par	t 11:	Give Details About Your Business or	Connections to Any Business					
27.	Wit	— hin 4 years before you filed for bankrupt	cv. did vou own a business or have an	ıv of	the following connections to any	business?		
	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
		☐ A partner in a partnership						
		☐ An officer, director, or managing exc	ecutive of a corporation					
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation					
		No. None of the above applies. Go to P	art 12.					
		Yes. Check all that apply above and fill		S.				
		siness Name dress	Describe the nature of the business		Employer Identification number Do not include Social Security I			
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	idiliber of friid.		
28.		hin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement t	to ar		de all financial		
		No						
		Yes. Fill in the details below.						
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued					
_		=						

Part 12: Sign Below

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Page 48 of 61
Case number (if known) Document

Debtor 1 Shavell T Walton

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Sh	navell T Walton	
Shav	ell T Walton	Signature of Debtor 2
Signa	ture of Debtor 1	
Date	August 25, 2016	Date
Did yo	u attach additional p	ages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
Did yo	u pay or agree to pay	someone who is not an attorney to help you fill out bankruptcy forms?
■ No		
☐ Yes	. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 49 of 61

Debtor 1	Shavell T Walto	on		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the	: NORTHERN DISTRICT	OF ILLINOIS	
if known)				☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.
- You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	\square Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 50 of 61

Debtor 1	Shavell T Walton	Case number (if known)		
name: Descrip	otion of	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. 	☐ Yes	
property securing debt:		☐ Retain the property and [explain]:		
For any ur in the info	rmation below. Do not list real estate lease	ases isted in Schedule G: Executory Contracts and Unexpired as. Unexpired leases are leases that are still in effect; the use if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.	
Describe	your unexpired personal property leases		Will the lease be assumed?	
Lessor's n Descriptio Property:	name: on of leased		□ No	
	name: on of leased		□ No	
Property: Lessor's n Descriptio	name: on of leased		□ Yes	
Property:			☐ Yes	
Lessor's n Descriptio Property:	name: on of leased		□ No □ Yes	
Lessor's n Descriptio Property:	name: on of leased		□ No	
Lessor's n	name:		□ Yes	
Descriptio Property:	n of leased		□ Yes	
	name: n of leased		□ No	
Property:	Cian Balana		☐ Yes	
Under per	Sign Below nalty of perjury, I declare that I have indicate that is subject to an unexpired lease.	ed my intention about any property of my estate that sec	ures a debt and any personal	
X /s/ S	Shavell T Walton	X		
Sha	vell T Walton ature of Debtor 1	Signature of Debtor 2		
Date	August 25, 2016	Date		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-27299 Doc 1 Filed 08/25/16 Entered 08/25/16 12:23:04 Desc Main Document Page 55 of 61

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Shavell T Walton		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR DI	EBTOR(S)
co	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 ompensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	y, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	832.00
	Prior to the filing of this statement I have received		\$	832.00
	Balance Due		\$	0.00
2. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4 . ■	I have not agreed to share the above-disclosed comp	pensation with any other person	n unless they are mem	abers and associates of my law firm
	I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
5. Iı	n return for the above-disclosed fee, I have agreed to re	ender legal service for all aspec	cts of the bankruptcy	case, including:
b. c.	Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credit [Other provisions as needed] Negotiations with secured creditors to be reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on how	tement of affairs and plan whic ors and confirmation hearing, a reduce to market value; ex ons as needed; preparatio	ch may be required; and any adjourned hea cemption planning	arings thereof;
6. B	y agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis any other adversary proceeding.	e does not include the following schargeability actions, juc	ng service: licial lien avoidanc	es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of an nkruptcy proceeding.	y agreement or arrangement for	or payment to me for i	representation of the debtor(s) in
Αu	igust 25, 2016	/s/ Angie S. Lee		
Da	•	Angie S. Lee 62: Signature of Attorn Attorney Angie 900 Ridge Road 2nd Floor, Suite Homewood, IL 6	82075 ney Lee, PC	

United States Bankruptcy Court Northern District of Illinois

In re	Shavell T Walton		Case No.	
		Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	47
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	ors is true and correct to the	he best of my
Date:	August 25, 2016	/s/ Shavell T Walton Shavell T Walton Signature of Debtor		

Aargon Agency 8668 Spring Mountain Rd Las Vegas, NV 89117

Accounts Recovery Bureau PO Box 6768
Wyomissing, PA 19610

Advocate Medical Group 701 Lee St Suite 300 Des Plaines, IL 60016

Afni 1310 Martin Luther King Dr Bloomington, IL 61701

American InfoSource Mail Station N387 2230 E Imperial Hwy El Segundo, CA 90245-3504

American InfoSource PO Box 248848 Oklahoma City, OK 73124-8848

Arnoldharris 111 West Jackson Suite 600 Chicago, IL 60604

Baxter Credit Union PO Box 8133 Vernon Hills, IL 60061

Baxter Ecu/BCU 340 N Milwaukee Ave. Attn: Bankruptcy Vernon Hills, IL 60061

Bay Area Credit Service PO Box 467600 Atlanta, GA 31146 City of Chicago - Dept of Finance c/o Talan & Ktsanes 223 W Jackson Suite 512 Chicago, IL 60606

City of Markham 16313 S Kedzie Parkway Attn Bankruptcy Markham, IL 60428

Dependon PO Box 4833 Oak Brook, IL 60522

EMP of Chicago PO Box 182554 Columbus, OH 43218

Enhanced Recovery Corp 8014 Bayberry Road Jacksonville, FL 32256

Escallate LLC 5200 Stoneham Rd North Canton, OH 44720

Fair Collections and Outsourcing 12304 Baltimore Ave Suite E Beltsville, MD 20705

Fst Premier 601 S Minneapolis Ave Sioux Falls, SD 57104

Global Telecom 4000 Executive Park Dr South Cincinnati, OH 45241

Harris & Harris 111 W Jackson Blvd Suite 400 Chicago, IL 60604 HCM First Notice of Loss 14501 Hertz Quail Springs Parkway Oklahoma City, OK 73134

Hertg Accpt 121 S Main St Elkhart, IN 46516

Hghts Aut Cu 21540 Cottage Grov Chicago Height, IL 60411

ICS/Illinois Collection Service Po Box 1010 Tinley Park, IL 60477

Ingalls Memorial Hospital PO Box 75608 Chicago, IL 60675

IRS PO Box 7346 Philadelphia, PA 19122

MCSI 7300 College Dr Palos Heights, IL 60463

Municipal Collections of America 3348 Ridge Road Lansing, IL 60438

Northwestern Hospital 250 E. Superior Street, LC-2201 Patient Billing - Bankruptcy Chicago, IL 60611

Penn Credit Corp PO Box 988 Harrisburg, PA 17108

QC Holdings Inc c/o Marauder Corp 74923 Highway 111 Indian Wells, CA 92210 Quantum3 Group PO Box 788 Kirkland, WA 98083

RJM Acquisitions PO Box 12023 Hauppauge, NY 11788

Sec of State 2701 Dirksen Parkway Attn: Bankruptcy Springfield, IL 62723

Sprint Customer Service - Bankruptcy PO Box 7949 Overland Park, KS 66207

St James Hospital Patient Billing 1423 Chicago Road Chicago Heights, IL 60411

The Ludwig Company c/o Cary G Schiff 134 N LaSalle #1720 Chicago, IL 60602

Town of Griffith 111 North Broad Street Griffith, IN 46319

University of Chicago Medicine 15965 Collections Center Drive Chicago, IL 60693-0159

US Bank PO Box 5229 Cincinnati, OH 45201

Us Dept of Ed/Great Lakes Educational Lo 2401 International Madison, WI 53704

Vilage of Matteson 20400 S Cicero Attn Tickets Matteson, IL 60443

Village of Lynwood 21460 Lincoln Highway Lynwood, IL 60411

Village of Richton Park 4455 Sauk Trail Attn Tickets Richton Park, IL 60471

Village of Sauk Village 21701 Torrence Ave Sauk Village, IL 60411

Washington Mutual Bank PO Box 99604 Arlington, TX 76096

West Bay Acquisitions c/o Receivables Mngmt 6440 Flying Cloud Dr Eden Prairie, MN 55344